Community Services Department Tempe History Museum ROOM RESERVATION REQUEST 2015



809 East Southern Avenue, Tempe AZ 85282

www.tempe.gov/museum

Phone: 480-350-5100 Fax: 480-350-5150

RESPONSIBLE PARTY INFORMATION (Must be present at meeting/event)

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First Name	Last Name			Business Phone		Cell/Home Phone		
Mailing Address				City		St	Zip	
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Email Address								
ALTERNATE CONTA	CT PERSO	<u>DN</u>						
First Name		Last Name			Business Phone		Cell/Home Phone	
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Email Address								
ORGANIZATION INFO	ORMATION	<u>1</u>						
Organization Name:								
Mailing Address (If diffe	erent from Res	nonsible Party)		City		St	Zip	
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Brief Description of Or	ganization							
MEETING INFORMAT	<u> </u>							
Description of Meeting	_J /Event:							
Number of Attendees: # of Tables Needed: # of Chairs Needed:								
Number of Attendees:			# OI Table	es ive	eueu.	# 01 01	nairs Needed.	
Will your meeting/ever		Food/Dri	nk	Arts/Crafts	Amplif	ied Music/DJ		
any of the following (ci Will your meeting/ever								
use of the following (ci		Microphon	e	Projection System	n D	DVD/CD Player		
	•							
Any special accommo	dations:							

<u>This is an application only.</u> All payments are due 3 weeks prior to the event. When payment is finalized, an event confirmation will be sent to you from the Tempe History Museum. ALL after-hours room rentals are contingent on staff availability. Any art display in the Community Room stays in place – providing guests a unique experience. By signing below I attest that I am at least 18 years of age, and have read, understand and agree to comply with all of the attached room reservation policies and procedures.

Signat	ture of Re	espon	sible Party				Date
FOR OF	FICE USE O	NLY	DATE RECEIVED:			Payment Information	
City Dept.	Com. Partner	Not f	Resident	Non Resident	For Profit	DATE OF EVENT:	

HOURS AVAILABLE: Tues. – Sat. 10:00 am to 5:00 pm Sunday 1:00 to 5:00 pm

ORGANIZATION NAME:	
RESPONSIBLE PARTY:	
# OF PEOPLE ATTENDING:	

DATES REQUESTED (PLEASE CIRCLE)

Please include set-up and take-down time when requesting dates & times **Blacked out dates indicate facility not available

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		JANL	<u>JARY</u>		5				EBR			15		MARCH 2015							
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OCTOBER 2015						NOVEMBER 2015								DECEMBER 2015							
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SET-UP TIMES:	SET-UP TIMES:	SET-UP TIMES:
MEETING/EVENT TIMES:	MEETING/EVENT TIMES:	MEETING/EVENT TIMES:
TAKE-DOWN TIMES:	TAKE-DOWN TIMES:	TAKE-DOWN TIMES: